Attorney Docket No.: 020545

COMBINED DECLARATION / POWER OF ATTORNEY

AS BELOW NAMED INVENTOR, I HEREBY DECLARE THAT: This Declaration is of the following type:											
	☐ Original ☐ Continuation	☐ Supplemental	☐ Continuation-In-Part ☐ National Stage of PCT	☐ Divisional							
My residence, post office address and citizenship are as stated below next to my name: I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention METHOD AND APPARATUS FOR REDUCING FREQUENCY ERRORS ASSOCIATED WITH AN INTER-SYSTEM SCAN, the specification of which:											
is attached hereto. was filed on as Serial No. 10/529,343. was amended on (if applicable). was described and claimed in PCT International Application No. PCT/GB2003/004179 filed on 24 September 2003 and as amended under PCT Article 19 on											
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Sec. 1.56(a).											
I hereby claim foreign priority benefits under Title 35, United States Code, Sec. 119 of any foreign application(s) for patent or inventor's certificate or of any PCT International application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.											
Gr	reat Britain	0222379.0	26 September 2002	Priority Claimed X							
	Country)	(Application No.)	(Day/Month/Year/Filed)	(Yes) (No)	_						
I hereby	ciaim the benefit under little	: 33 03C 119(e) of any of	nited States provisional application(s) lis	sted below.							
I hereby the claim USC 112	(Serial No.) claim the benefit under Titles of this application is not by, I acknowledge the duty to	e 35 USC 120 of the Unit disclosed in the prior Un disclose material informa	(Filing Date) ted States application(s) listed below, and the ditted States application in the manner position as defined in Title 37 CFR 1.56(a)	(Status) and insofar as the subject matter of each rovided by the first paragraph of Title	e 35						
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LEGAL REPRESENTATIVES (35 U.S.C. 117)

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION			Supplemental Sheet Page 1 of 1							
Name of Local Danascontation										
Name of Legal Representative:		A petition has been filed for this non-signing legal representative								
Given Name (first and middle (if any))		Family Name or Surnam				me				
<u>Julie</u>	٠,	Stuart								
Legal Representative's Signature				Date 24/7/05						
Residence: City: Longfield	State:	Kent	Country: United Kingdom		Citizenship: Great Britain					
Mailing Address: 17 Lambardes, New Ash Green										
Mailing Address: Longfield, Kent, DA3 8HX, United Kingdom										
City: Longfield	· ·	Sta	ate Kent Zip DA3		Country United SHX Kingdom					
Name of Additional Legal Representative, if any: A petition has been filed for this non-signing legal representative										
Given Name (first and middle (if any))		Family Name or Surname				me ,				
Legal Representative's Signature		Date								
Residence: City			Country		Citizenship					
Mailing Address										
Mailing Address										
City		Sta	te	Zip		Country				
Name of Additional Legal Representative, if any: A petition has been filed for this non-signing legal representative										
Given Name (first and middle (if any))		Family Name or Surname								
Legal Representative's Signature		Date								
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Mailing Address										
City		Sta	te	Zip		Country				

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(DECLARATION 35USC117.VER1.0_01/11/05)

